

Case Docket No. 2004U002.US**"PATENT"****DECLARATION FOR PATENT APPLICATION**

As a below named inventor, I hereby declare that:

My residence, post office address and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

Fluoroalcohol Leaving Group for Non-Metallocene Olefin Polymerization Catalysts

the specification of which is attached hereto unless the following box is checked:

[X] was filed on 02/17/2004 as Application Serial No. or PCT International Application No. 10/780,438 and was amended on N/A (if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment referred to above.

I acknowledge the duty to disclose information which is material to the examination of this application in accordance with Title 37, Code of Federal Regulations, § 1.56.

I hereby claim foreign priority benefits under 35 U.S.C. § 119(a)-(d) or § 365(b) of any foreign application(s) for patent or inventor's certificate(s), or § 365(a) of any PCT International application which designated at least one country other than the United States, listed below and have also identified below, by checking the box, any foreign application(s) for patent or inventor's certificate(s), or PCT International application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application(s) Priority Claimed

<u> </u> (Number)	<u> </u> (Country)	<u> </u> (Day/Month/Year Filed)	<input type="checkbox"/> Yes	<input type="checkbox"/> No
<u> </u> (Number)	<u> </u> (Country)	<u> </u> (Day/Month/Year Filed)	<input type="checkbox"/> Yes	<input type="checkbox"/> No

I hereby claim the benefit under 35 U.S.C. § 119(e)(1)-(2) of any United States provisional application(s) listed below.

<u> </u> (Application Number)	<u> </u> (Filing Date)
<u> </u> (Application Number)	<u> </u> (Filing Date)

I hereby claim the benefit under 35 U.S.C. § 120 of any United States application(s), or § 365(c) of any PCT International application designating the United States, listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States or PCT International application in the manner provided by the first paragraph of 35 U.S.C. § 112, I acknowledge the duty to disclose material information which is material to patentability as defined in 37 CFR § 1.56 which became available between the filing date of the prior application and the national or PCT International filing date of this application.

<u> </u> (Application Serial No.)	<u> </u> (Filing Date)	<u> </u> (Status - patented, pending, abandoned)
<u> </u> (Application Serial No.)	<u> </u> (Filing Date)	<u> </u> (Status - patented, pending, abandoned)

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POWER OF ATTORNEY: As a named inventor, I hereby appoint the following attorney(s) and/or agent(s) to prosecute this application and transact all business in the Patent and Trademark Office connected therewith.

NAMES	REGISTRATION NUMBERS
Kevin M. Faulkner	45,427
Stephen P. Koch	37,660
Raul R. Montes	32,545
Osborne K. McKinney	40,084

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SEND CORRESPONDENCE TO:	DIRECT TELEPHONE CALLS TO:
Univation Technologies LLC 5555 San Felipe, Suite 1950 Houston, Texas 77056	Kevin M. Faulkner Phone No.: (713) 892-3729 Facsimile No.: (713) 892-3687

OFFICIAL

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

FULL NAME OF INVENTOR	LAST NAME WENZEL	FIRST NAME TIMOTHY	MIDDLE NAME T.	
RESIDENCE & CITIZENSHIP	CITY Charleston	STATE OR FOREIGN COUNTRY West Virginia	COUNTRY OF CITIZENSHIP United States of America	
POST OFFICE ADDRESS	POST OFFICE ADDRESS 888 Poplar Road	CITY Charleston	STATE OR COUNTRY West Virginia	ZIP CODE 25302

Inventor's signature _____

Date _____

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FULL NAME OF INVENTOR	LAST NAME DIXON	FIRST NAME ZONDRA	MIDDLE NAME DEE	
RESIDENCE & CITIZENSHIP	CITY Charleston	STATE OR FOREIGN COUNTRY West Virginia	COUNTRY OF CITIZENSHIP United States of America	
POST OFFICE ADDRESS	POST OFFICE ADDRESS RR 2 Box 481	CITY Charleston	STATE OR COUNTRY West Virginia	ZIP CODE 25314

Inventor's signature

Zondra D. Dixon

Date

June 17, 2004

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